

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007371

FILED  
Apr 03, 2009  
Secretary of State

**Entity Name:** UNITED SERVICE ORGANIZATIONS, INC.

**Current Principal Place of Business:**

2111 WILSON BOULEVARD  
SUITE 1200  
ARLINGTON, VA 22201

**New Principal Place of Business:**

**Current Mailing Address:**

2111 WILSON BOULEVARD  
SUITE 1200  
ARLINGTON, VA 22201

**New Mailing Address:**

**FEI Number:** 13-1610451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PCEO ( ) Delete  
Name: POWELL, EDWARD A  
Address: 2111 WILSON BOULEVARD  
City-St-Zip: ARLINGTON, VA 22201

Title: SVP ( ) Delete  
Name: FLANAGAN, JACK  
Address: 2111 WILSON BOULEVARD  
City-St-Zip: ARLINGTON, VA 22201

Title: CFO ( ) Delete  
Name: PARISI, PHIL  
Address: 2111 WILSON BOULEVARD  
City-St-Zip: ARLINGTON, VA 22201

Title: VP (X) Delete  
Name: BOB, HOFF  
Address: 2111 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22201

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PCEO (X) Change ( ) Addition  
Name: GIBSON, SLOAN  
Address: 2111 WILSON BOULEVARD  
City-St-Zip: ARLINGTON, VA 22201

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES URDANICK

DIR

04/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date